DOCUMENT RESUME

ED 035 017 CG 004 677

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TITLE Personalization--Individualization for Learning. A Conference Report.
PUB DATE May 69
NOTE 46p.; Conference entitled, "Personalization--Individualization For Learning," Cheyenne, Wyoming, October 10--11, 1968

EDRS PRICE EDRS Price MF-$0.25 HC-$2.40
DESCRIPTORS Administrator Responsibility, Developmental Guidance, Dyslexia, Educational Diagnosis, *Elementary School Guidance, *Individual Needs, *Learning Disabilities, Neurological Defects, *Remedial Instruction, *Self Concept, Teachers, Teaching Methods, Testing

ABSTRACT

The theme of the conference, "Personalization--Individualization for Learning," focused attention upon children as persons who are individuals functioning in the school setting. Don Dinkmeyer in his talk "Elementary School Guidance and the Classroom Teacher," discusses the role of the teacher in promoting growth in the self concepts of his students. Dr. Dinkmeyer discusses in his second talk "The School Administrator and Developing Guidance," the basis for elementary guidance, its purposes, services offered, and the administer's role in guiding learning. Guidance leadership responsibilities are also presented. Dr. Alex Bannatyne discusses various learning disabilities, basically explaining dyslexia, and neurological dysfunction in his talk, "The Classification of Learning Disabilities." He further discusses diagnosis, testing procedures, and techniques for teaching children with learning disabilities in his talk, "Diagnosis, Prevention and Remediation of Learning Disabilities." (KJ)

ED035017

A CONFERENCE

"Personalization"
"Individualization"
for Learning

Wyoming State Department of Education

CG004 677

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CONFERENCE

"PERSONALIZATION - INDIVIDUALIZATION FOR LEARNING"

Cheyenne, Wyoming
October 10 - 11, 1968

Sponsored By
WYOMING STATE DEPARTMENT OF EDUCATION
Divisions of
PUPIL PERSONNEL SERVICES - EXCEPTIONAL CHILDREN

HARRY ROBERTS
State Superintendent of Public Instruction

Thomas L. Morris, Director
Division of Pupil Personnel Services

Dr. Sara James, Director
Division of Exceptional Children

Report Published By
Division of Federal Programming
Wyoming State Department of Education
State Capitol Building
Cheyenne, Wyoming
May, 1969

FOREWARD

The theme of the conference, "Personalization-Individualization For Learning" focuses attention upon children as persons who are individuals functioning in the school setting. In planning learning experiences with children, each child is seen as a person of worth and dignity; one who has certain mental capabilities, certain physical characteristics, and emotions and feelings. Planning for learning is done with the child so as to make learning relevant and meaningful to each individual child as he experiences living.

This theme permeated the entire conference as consultants Dr. Don Dinkmeyer, Professor, Department of Guidance and Counseling, DePaul University and Dr. Alex Bannatyne, Associate Professor, Institute for Research on Exceptional Children, University of Illinois, projected expertise in their respective areas of elementary guidance and learning disabilities.

Complementing the sessions conducted by the consultants were panel discussions, demonstrations, small group discussions and presentations. The State Department of Education wishes to acknowledge the persons involved in these activities for their able participation in adding to the total scope of the conference.

Roger Hanson, Assistant Superintendent of Public Instruction, State Department of Education
Dr. Dale Harper, Instructional Materials Center, Representative, Greeley, Colorado
Dr. George Bailey, Superintendent, Cheyenne Public Schools
Dr. Ken Card, Special Education Department, Eastern Montana College, Billings, Montana
Miss Grace Sharp, Counselor, Cheyenne
Charles Wing, Director, Educational Diagnostic and Planning Center, Cheyenne
George Story, Program Director, Educational Diagnostic and Planning Center, Cheyenne
Ted Gloeckler, Counselor, Educational Diagnostic and Planning Center, Cheyenne
Gloria Werner, Social Worker, Educational Diagnostic and Planning Center, Cheyenne

A. M. Burton, Elementary Principal, Casper
Clint Harris, Special Education Teacher, Cody
Glee Aisenbrey, Special Education Teacher, Cheyenne
Robert Nash, Counselor, Riverton and Lander
Dr. Glenn McMenemy, Counselor, Rawlins
Mrs. Marlin Lowry, Parent, Cheyenne
Mrs. Gerald Rankin, Parent, Cheyenne
Mrs. George Ingram, Parent, Cheyenne
Mrs. Oliver Ray Price, Parent, Cheyenne
Mrs. Bill McIlvain, Parent, Cheyenne
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Elementary Guidance Consultant

TABLE OF CONTENTS

Program. vi

"Elementary School Guidance and the Classroom Teacher"
Don Dinkmeyer 1

"The School Administrator and Developmental Guidance: A Procedure for Personalizing Education"
Don Dinkmeyer 11

"The Classification of Learning Disabilities"
Alex D. Bannatyne 20

"Diagnosis, Prevention and Remediation of Learning Disabilities"
Alex D. Bannatyne 29

Summary of Special Sessions 39

PROGRAM

OCTOBER 10, 1968

8:00 AM REGISTRATION -- Coffee

9:00 AM WELCOME

9:15 AM THE SCHOOL ADMINISTRATOR AND DEVELOPMENTAL GUIDANCE, Dr. Don Dinkmeyer, Professor, Department of Guidance, and Counseling, DePaul University

10:15 AM COFFEE -- Film, "As They Grow"

10:45 AM LEARNING DISABILITIES--DIAGNOSIS AND CLASSIFICATION, Dr. Alex Bannatyne, Associate Professor, IREC, University of Illinois

11:45 AM DISCUSSION of presentations

12:00 N LUNCH, specified groups with consultants

1:15 PM ROCKY MOUNTAIN SPECIAL EDUCATION INSTRUCTIONAL MATERIALS CENTER, Dr. Dale Harper, IMC Representative, Greeley, Colorado

1:45 PM GROUP GUIDANCE DEMONSTRATION, Dr. Dinkmeyer and Miss Grace Sharp, Counselor, Cheyenne Public Schools

1:45 PM ILLUSTRATIONS OF LEARNING DISABILITIES, Dr. Bannatyne

2:40 PM COFFEE

3:10 PM SMALL GROUPS

4:30 PM DISCUSSION

6:00 PM SOCIAL HOUR

7:00 PM BUFFET

OCTOBER 11, 1968

8:45 AM OPENING REMARKS

9:00 AM PREVENTION AND REMEDIATION OF LEARNING DISABILITIES, Dr. Alex Bannatyne

10:15 AM COFFEE -- Film, "Learning Disabilaties"

10:45 AM ELEMENTARY SCHOOL GUIDANCE AND THE CLASSROOM TEACHER, Dr. Don Dinkmeyer

11:45 AM LUNCH, specified groups with consultants

1:00 PM PRESENTATION, Mr. Charles Wing, Director, Educational Diagnostic and Planning Center, Cheyenne

1:30 PM PARENT-EDUCATION GROUP DEMONSTRATION, Dr. Dinkmeyer

2:15 PM DISCUSSION:
Panel of parents
Panel of school personnel

3:15 PM OPEN DISCUSSION

3:45 PM EVALUATION

Dr. Don Dinkmeyer - Consultant
Professor, Department of Guidance and Counseling
DePaul University, Chicago

(Transcript of Speech Presented at the Conference)

ELEMENTARY SCHOOL GUIDANCE AND THE CLASSROOM TEACHER

I would like to talk today about the role of the classroom teacher related to elementary school guidance because I think it is important to see it in perspective. From my point of view, part of the proper perspective is the role of the elementary school teacher. I think, without a doubt, the guidance program in the elementary school frequently has been poorly conceptualized, haphazard, and randomized. It has been my privilege and opportunity to see counselors at work in elementary programs in some thirty-eight states. Some teachers are doing an adequate job of elementary school guidance, and some are doing an excellent job. Some of the things we saw yesterday on the film "If These Were Your Children" are certainly guidance types of experiences, and also, some of the things you saw on the filmstrip last night. Many teachers assume few of the responsibilities that relate to guidance. If we approached mathematics or reading or anything else in as unsystematic a fashion as we approach the guidance responsibility we wouldn't expect much to come of it. In many instances the guidance program seems to be an outgrowth of teachers who are interested, in contrast to teachers who are disinterested. It seems to me that when we are dealing with a variable as important as the self concept and all the data that we have about this in terms of the functioning of individuals--this is not a very prudent way to run the public schools. It seems to me that no amount of administrative manipulation, curriculum planning, and diagnosis will necessarily be effective until we do something to reach individual children. This implies that the guidance kinds of programs that we are trying to talk about today have certain kinds of basic principles that you might look at if you are a school principal or a school teacher--and say "Is this what is going on in our school?" If so, then we have a developmental elementary school guidance program.

First of all the guidance program is for all children--the four hundred or eight hundred that might be enrolled. It is developmental as well as remedial in nature. It is directed at helping children know and understand and accept themselves. It helps children become participants in self study--in knowing about self. Guidance then provides the individual with some sort of an assessment of self. The opportunity to plan and choose and be responsible for the consequences of choice. This is something that I find school teachers have great difficulty doing--letting children be responsible for the consequences of their

choices. Many school teachers, who are women, know that nagging is ineffectual in the home, but they attempt to transfer the same procedure into the classroom. You can't get any further with the little boys than you can with the big ones. As a result, instead of letting them experience the consequences of some of these acts we attempt to goad them on. Guidance is not only incidental, but is based on a well organized and continuous program that provides for all, through the teacher--that focuses on knowing what is good about Johnny. I worked for awhile as an elementary school counselor and consultant on a part time basis. On my referral form for the teachers to fill in I had two things that were difficult for them to complete. One was--what do you know about him that you consider to be an asset or a strength? Second--what do you do with him that works well? When teachers could answer these two questions it really reduced the number of referrals. One time I can remember well. We went to a school district, and we didn't have this many people in the audience, we had probably seventy-five teachers, and I was a school psychologist. We handed the teachers their class list--they had known the children for about a month, and we asked them to, behind the name of each child, list his assets, his strengths, and what was good about him. The first question that came from the audience was--"Dr. you've made a mistake, you are a psychologist and you probably want to know his liabilities". We had to explain that I wasn't that kind of psychologist. I was interested in his assets. An interesting thing developed out of this--according to the superintendents and the principals--the teachers who had the greatest difficulty in returning the list were the teachers who had the greatest difficulty in dealing with the children. The purposes of this kind of service are: to help teachers meet the needs of all students in the varied areas, to promote some understanding of the individual, to encourage adaptation of the program to the specific needs, purposes, interests and maturity. We need to promote early identification of both individual strengths and talents to make the teacher aware of and sensitive to the child's personal needs, goals and purposes. Many of the things that we are talking about today, in the area of Educational Psychology, were taught to these people as undergraduates. I have participated in teaching Child Development and Child Psychology to eighteen and nineteen year old girls. How come they don't know this when they are out in the field and why is it that they come back to the same university at age twenty-five and are so excited about the same course that they didn't do too much in originally? Partically because they had a different developmental path. When they were nineteen and we were talking about the seven year old boys--they were interested in the twenty year old boys and that wasn't part of our curriculum. Maybe one of the roles of the elementary counselor is that he is the person who eventually puts the principles of Educational Psychology, Child Development, Learning Theory, and Guidance into practice. The prediction is that in the sophisticated public schools we are forty years behind in what we know about human beings, and I hesitate to chance where we would be in schools less sophisticated.

So, I am going to talk briefly about certain fundamental assumptions about human behavior that work well in dealing with almost all kinds of children. The first assumption is that the human personality is best understood in its unity. I have had some training as a clinical psychologist, and I have sat in on staffing and I think there are great advantages in getting twelve people around the table and talking about children. But sometimes there are disadvantages, too, in that the more we collect the more we see the side of the elephant and we never see the whole. We don't see the pattern of the child's psychological movement. The behavior that the child shows you--that you see in front of you--frequently explains what it is that he is doing, and why he is doing what he is doing. You start to understand the transaction from you to the child and the child back to you, and these will be explanatory of a number of kinds of events. I have found some of the best diagnostic information I have does not exist always in the sophisticated, projective technique but in the anecdote that tells: What did you do? What did he do? What did you do next? Why? Because I believe that behavior is usually a result of its consequences. Many of the youngsters in school are pretty good predictors of what the teacher will do. When they do something they do it with the full awareness of what is happening. This is one of the reasons that they are always interested in the appearance of a substitute. It permits them to collect all kinds of new data. For years we have thought of the teacher as the analyst of the child, but if you really believe that, you haven't taught the children very closely. Part of my job is talking to them, and my observation is that usually in a classroom the teacher will say -"give me a month and I will understand the children well." No child would dare take that long to understand the teacher. Within about one day, and sometimes within a morning, he knows what bothers you and what doesn't bother you; and what the limits are and what the limits are not; and what he can do to get by, and all kinds of things. He has all kinds of important data.

We must become aware of the goal as the final cause--the goal tells us why he is doing what he is doing. This can be very explanatory, and yet the ideas for corrective action often follow as we understand the purpose of the child's behavior. I think a lot of misbehavior can be classified in terms of active or passive. We have some youngsters who are what I call active constructive--they just do their work. There are some who are active passive youngsters. They charm the teacher so they don't have to do the work. This is particularly common in the early elementary years. Some of you who teach first and second grade know that some of these traits do not help later on. The child is deceived and wants to know--"how come, when I smiled and had curly locks everybody said 'oh, he will grow up' and this same trait doesn't carry me through fifth grade?" There are also youngsters who are in the passive or active destructive areas. So--we've talked about the goals of children in terms of misbehavior in four areas. I think the child you can see

in most classrooms is the child who does what he does in order to get attention. He does it in order to keep you busy with him. Or, there is the child whose purpose is to show who is in control. Now, how can you tell the difference? We have taken most of anything that relates to values out of our schools, but say that you are ready to have the pledge to the flag. Everybody is standing up and Johnny is sitting down. You say, "Johnny, stand up." And he says, essentially, (under his breath) "Thanks for the P.A. announcement that I am here." He stands up. All he wanted was your attention. If, when you said "Stand up", Johnny insisted that you come back and get him up, then you are in a situation where the child is interested in power. Another child is one who is interested in revenge--interested in getting even with the teacher or society. The fourth kind of purpose which we talk about is the goal of inadequacy. To show you can't, because of the gain that comes from showing that you can't. If, in school, you can convince the teacher that you can't, eventually, she too gives up. Then there is the perfect relationship. He does not want to work, and you do not believe he can, and so, he sits there, and everybody says "What can we do with him?"

So, if you begin to look at--what are the purposes of behavior? Then you start to see motivation in terms of finding out how does the child strive to be significant or how is he seeking to be known. There is something I think you always need to know about any child. What way is he seeking to be known? Because behavior and misbehavior always make sense to the individual. Whenever I have seen a teacher say something like "that behavior doesn't make any sense," then it is obvious that she doesn't have a psychological approach. Let me give you an anecdote. After the development of the Encouragement book, I had some opportunities to do workshops to encourage teachers to utilize these procedures. One time one of the teachers started to do some things with a youngster, and he started to function better, and she even took him to lunch one day (it was in an elementary school) and he reacted beautifully with her. Things were so great that when she came back after lunch she went down to report on her great success to the principal. When she came back, Joe, who had been her luncheon partner, had turned things almost completely upsidedown. Her complaint to me was, "How could he do it? After I had been so good to him." When she flew into a rage, I explained to her that she had destroyed one months work in about three minutes of emotional reaction. What was Joe reacting to? He was running one of his tests. His test said, "You liked me at noon when I was nice. I wonder if you like me, though, and how are you going to react if I act this way?" In other words, are you faking it with me or do you like me, really. Sometimes, with children who are difficult to teach, we have to understand--what is the sense of this behavior, and in certain circumstances not to fall for their tricks. I have talked and worked with teachers who have learned how to talk to the child, to explain to him--do you know why you are doing what you are doing? And to help him see what it is that he is doing. Because all behavior has social meaning. This is again, I think, a misunder-

standing on the part of some teachers. In many ways, schools of education do not teach in this sense. They send them out into a social atmosphere--the classroom--in which there exists group dynamics going on at a great pace at all times, and they give them no training to understand the management of a group. First, we need to have a course with such a title. The course might not be too good, but at least if we have a course title it would indicate that we thought this was an important area. If they are to manage groups, they better know how to manage the group dynamics. All behavior has social meaning, and must always be seen it its social context. Misbehavior in the classroom often has its meaning and sense in terms of its social reward. What Billy does that may be bothersome to you earns him, in terms of the striving for significance, his reputation with the boys. The social reward is more than anything you can give him. If you do not have a group discussion, if you do not have some way to deal with these dynamics, then you are lost in the battle of the sociometry of the classroom which is seldom within the awareness of many teachers. This misbehavior, then, makes sense in terms of what he is getting. Have you ever noticed how some children really miss the absence of the troublemaker on a given day. They are worried if Joe isn't going to be there because Joe keeps things going. But if he is not there--it is hard to quickly muster a replacement. The kids haven't developed the next actor who takes on this kind of role. Another principle is-- belonging is a basic need of all human beings. They need to belong. It can be a corrective factor seldom utilized in the typical classroom. If we start now to take on a different orientation when we look at children, we begin to say that behavior and its consequences are the explanation and the consequence of what he does. With everything that's going on, what is he getting from the situation? I remember the first time we really put this to a test. Moving from a college that had all suburban teachers to DePaul which has heavily urban teachers. The first question that I had, of course, from the people that were in the course was, "These things won't work with the kids in the city." But the interesting thing was how quickly they began to see that if they understood the principles they were very applicable to the understanding and changing of the children that were in the city, too. What we are suggesting is that teachers come to understand the style of life. The frame of reference that a child has, his private logic, his convictions, and his attitudes. Most of the data that we have in our files talks about the psychology of possession--which is interesting and fascinating and detailed and sometimes even boring. It tells us about his I.Q. and his achievement scores and all the other kinds of things that are status data revealing the skeleton but not the motive. But, frequently this is not what the teacher needs to know to understand Johnnie. Because he has a good I.Q. she is completely baffled by the fact that he does no work for her. She teaches the fifth grade and all of his achievement scores are at seventh grade level, but we don't have the kind of data that explains--what is his style of life? What are the basic assumptions that he operates on when he deals with people? Now,

what do we mean by styles of life. Well, style of life is the characteristic way of looking at life. We all have styles of life. If some of you are expected home for supper at six, and you are the wife and are suppose to have it ready, but you come home at eight--you can predict your husband's style of life--some will say, "Well, great! lets go out to dinner." The point is--you know something about his style of life by long periods of exposure. But teachers have to be able to acquire life style information in a much quicker fashion. I have found children having styles of life characterized by things such as this: I must be more than others, or I only function if I am first--make me the king or queen and I do something--don't recognize that I am first and then no cooperation from me. These are styles of life. There are people who are willing to demonstrate their inadequacies--who go on the assumption I am not as much as others, and because they believe I am not as much as others; it is almost like a printout that programs their interaction with other people. This is how they function. Incidentally, you could see a number of these children in the film "If These Were Your Children." Other children function on the premise of excitement is the most important thing. You could see a few of these children in the movie yesterday. For them the key thing is how do you get action going in the classroom? There are many other, what I call, basic premises about life which people function on--adults, children, everyone. Do you begin to understand the style of life, and the basic assumptions and convictions and attitudes and goals? If you say, "Gee, I don't want to get involved in understanding all the psychology, this is something I don't want to get involved in." Then the only other choice you have is to become a victim of it. You are not going to have the children stop getting your attention, showing you who is the boss, getting even and proving that they are inadequate. The fact that you want to shut this out doesn't mean that they are going to cooperate and not still have these varied styles of life. So I think, the teacher's rule can be broadly defined in two areas. 1. identification of needs and 2. changing attitudes. So, to me, the basic premise in the educational process from a guidance point of view, relates to the mutual alignment of goals and purposes. The teachers have all their goals, they even have their lesson plans. It's in the mind, it makes certain people happy, but has no bearing upon what goes on in life. So, they have their plan, they know where they are going. But all the children that come in the room--they know where they are going, too. We do not realize that in our classrooms we have children that come in with different motors. Some of them have jet motors, some of them have railroad motors, and some of them have Volkswagen motors, but the idea is, they don't all run at the same rate. When you teach a classroom you act as if they all have jets or Buicks or whatever it is. If they don't have that motor obviously there is something wrong with them--not your system! Well, then we begin to wonder who is living in reality--the youngsters or the teachers?

The techniques of the teacher then become, primarily, those of observation. Observation, in terms of how a child is striving to be significant, we see that

the actions of the child express his attitude, his goals and his expectations. There are other kinds of techniques that classroom teachers can use such as sociometrics. Everybody could probably define what sociometry means. I would be very surprised if more than two percent of the teachers had ever used them effectively in understanding children in the classroom. There are pupil interest inventories and incomplete stories. For sophisticated teachers who have certain kinds of training, we have used things that we use diagnostically in our counseling work such as early recollections. Now, I am <u>not</u> suggesting that any of you start to use early recollections. I would only suggest what might be learned because this, to me, is a counseling procedure that we try to train our counselors to use. What is the first thing you can remember? Let me give you a quick example. I am working with an eight year old boy. He does poorly in school, among other things. I am interested in his early recollections. One of the recollections is--I remember when I was about five years old and on my three-wheeler, and all the other kids were on their two-wheelers and I am trying to catch up to them and I can't. I always ask them how they feel--they feel badly. So, what does it tell you? It tells you, among other things, I'm not as much as others--I'm on a three-wheeler other people are on two wheelers. Some of these kinds of diagnostic procedures help us to begin to see the unity and the pattern and some idea of the purposes and values and assumptions that the child has in regard to life. It seems to me that many teachers are fairly good at identification, and that the major problem becomes one of going beyond this. Stated another way, and I am not speaking from experience in Wyoming, I think that throughout the nation we have far too many sophisticated psychological reports which tell us what we already know. I don't know how psychologist work in this area, but in some areas the report tends to varify to the teacher what she already knew--that he wasn't so smart, and you ought to treat him as an individual!

Now, it seems to me that the next area that requires needed work is curriculum experiences that help children in terms of acquiring the guidance learnings of self understanding, accepting responsibility, and making choices and understanding the nature of human behavior and its relationship. We have had some very fascinating experiences with very early educational experiences in the primary grades in helping children understand why people act as they do. So that after assessing the individuals capacity and his purposes, attempts ought to be made to do something to individualize the instruction through the utilization of non-graded or some other type of plan. I have seen lots of teachers who do a considerable amount of teacher-pupil planning, teacher-pupil evaluation to get the focus of the child off of believing that only you are evaluating him, but also he is evaluating himself. The typical answer from children when they come home is--I've got to do Mrs. Smith's work. This, to me, is the beginning of the problem. It's not their work--it is yours--if they can give it back to you in proper form. Every month teachers spend so much time writing all over these bad papers. Have you ever noticed what the kids do with them? They crumple them up and put them in the wastebasket. There

must be better ways that teachers can cathart than to write all over the papers of children. We have found an entirely different method that is a simple guidance procedure. We only write when the children do something that is right. When there is something that is wrong we don't deal with it except we ask them to do something about it.

There are other kinds of procedures like bibliotherapy. The utilization of books to help children develop some insight about self. Group discussions. Yesterday you saw a demonstration of group discussion. You can expand that kind of group discussion into much larger classroom units. All you have to do is establish a few rules. The people need to talk about their concerns. They need to be willing. They must be willing to listen. They've got to be interested in helping each other. Your primary function is linking--what it is Joe is saying that is like what Billy is saying. Develop some procedures whereby group discussion can become a guidance technique. If you have a lot of things that are bothering you in school, you are not thinking on the school problems anyhow. If the school can provide a type of group discussion then you obviously become engaged in facilitating a process for which you think you are there. I think you must recognize that there are no cognitive experiences which are not immersed in emotion and feeling. But somehow or other we seem to think they are--you can deal with people cognitively without the feeling area. There are increasing amounts of published material. McCormick Mather had some reading series, Dr. Ojemann,who was at Iowa, had some mental health books for use in the elementary school. These are short discussion stories that lead into some discussions about self and others. NEA has short stories, and at present, American Guidance Services, who produced the Peabody set, is in the process of the development of classroom guidance materials. The materials are now coming at a more rapid rate.

One of the most effective techniques which requires no material at all is the technique of encouragement. Helping the child to feel his worth and to facilitate the development of his security. Or in simple terms, providing more opportunities in the classroom for success than failure. Helping children know that they are valued and accepted, and that we have some faith in them and in their abilities so that you can build their self respect. We have a lot of research evidence--Davidson and Lang's outstanding study--that children's self percepts are picked up from teachers--what I believe I am as a student. What concept you got of yourself as an arithmetic student in the third grade came from the feedback which you received from a teacher stayed with you a long time in terms of what you believe about yourself in math. So, you can use your group often to enhance the development of the child. This is what I mean by sometimes trying to use the psychological in contrast to the logical approach. For example, lets take a simple thing--the use of responsibility. Most teachers think that it is only logical that the good students who prove that they can be responsible get the responsibilities, i.e. wash the board, etc. They already utilize the

youngsters that have responsibility to prove to the other children that they are superior to them. In other words, they take something that can have great value and they utilize it in the wrong way on the basis of saying--"If you prove to me that you have climbed the mountain (they never explain how you go about proving this, incidentally) if you prove to me that you are responsible, then I'll give you some responsibility." Responsibility can be a tremendous therapeutic agent in the classroom for the changing of children. One example, a child who is always coming in late. I said to the teacher, "Lets have him be the boy who puts down the roll," and she said, "That's not logical," and I said, "When have we ever suggested anything logical"! "So, we are talking about psychological approaches--why don't you try it for two weeks?" We solved the problem because we tried to understand what was going on with him. Also, teachers can be organized to think more creatively. For example, the utilization of a simple kind of procedure--natural consequences. Natural consequences can apply to a variety of settings. Mothers sometimes have problems in getting the youngsters to come to dinner. They call and they call--dinner is at 5:30 and nobody appears. So she does the next best thing which is to run a cafeteria. Sometimes the meal problem can be solved through natural consequences. Explain to the child--we eat at six, and if he comes at 6:20 then you tell him what time breakfast is. The most interesting part about it is that it will work because the true test of discipline is how many times you do it. For those of you that are mothers; how many times have you told your child something that he already knows? This is another good rule for teachers. Never tell a child anything that he knows already. A couple teachers said, "Do you realize that that would make me speechless"!

What is another basic premise related to the relationship with the child? To me a relationship with the child consists of two essential components. Being kind and being firm. Most people have difficulty with this. They can be kind and then they have trouble being firm. What does being kind and being firm mean? Being kind means you respect and love the child. Being firm means that you respect yourself and have some love for yourself. Children will usually function well for teachers that are kind and firm, but for teachers who only have one-half of the paradigm, there is considerable problem. So these kinds of teachers frequently have used natural consequences and group discussion. Let me see if we can illustrate how. In some classrooms you have children who, as soon as you give the assignment, raise their hand and say "Now, what are we suppose to do?" And the teacher starts considering some complex disorder. We explain to them that we give the assignments once--at the start of the period, the second time at the end of the day, at which time they do the work, too. This does great things to increase the auditory recall of youngsters. If they know that you do not repeat assignments in most instances. The natural consequence--better listening, if you are interested in getting the assignment.

There are other kinds of natural types of consequence that can be utilized with children. The teacher who is trained in psychological methods sometimes can utilize things like disclosure. In other words, she has an idea about why the child is doing what he is doing--for attention and power etc. How does she get the ideas? 1. She may get the idea by her own observations of movement between the youngsters. She sees the transaction and sees the consequence of what is happening to people, and she says "I think he is doing this to keep people busy with him." 2. She uses her own equipment--her feelings. Like--"I'm annoyed" or "I'm going to show him" or "I give up . I don't know what to do about him." Those are all diagnostic of the child's purposes, of attention and power or inadequecy, so she uses her own equipment. Because we can't keep buying equipment, we have to use some of our own. I've seen some very interesting group discussions where eventually the youngsters are much better at picking out the goals and purposes of the children than the teachers, because they've got all kinds of good data about them. So, the youngsters become very theraputic and corrective to each other. Then, after you have disclosed, and if you have this kind of training, then you help the child to see alternative ways. There are other ways to get attention. There are other ways of getting some kind of power that may be active and constructive. So, I am suggesting that the teacher can be most effective if he has available somebody who serves this role. The elementary counselor who helps him to develop understandings about human behavior, who serves as consultant, who may demonstrate activities in the classroom, who, to make it short, may do some of the things related to some of the things we saw on the film last night.

Now, I guess we come to the fundamental and basic question which is--is the teacher a guidance worker in the elementary school? It seems to me that most people went into school teaching originally because they were interested in children and then came the thing we call expansion of knowledge and the direction towards making them experts in science, math., etc. When we all eventually move to a period of instrumentation for learning, if the teacher isn't an expert in human relations, what will they do? Instrumentation will be more effective with youngsters than procedures you have. We already know that children are exposed to so many kinds of things on television, in certain kinds of effective ways, that they know things that we didn't know when we went to school. It is apparent, then, that if the teachers are concerned with assisting the child to achieve these tasks, then they must become primarily concerned about--how do you help them understand themselves and others? If a teacher is involved with these tasks of understanding, accepting, clearifying, encouraging and building an adequate concept of self, then he is, by virtue of the definition of the guidance process, a guidance worker. It is clear that if the goals of guidance in American education are ever to be achieved for all pupils, then it is only through the teacher, assisted by a competent consultant--call him a counselor if you will--that we can reach all children.

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(Transcript of Speech Presented at the Conference)

THE SCHOOL ADMINISTRATOR AND DEVELOPMENTAL GUIDANCE: A PROCEDURE FOR PERSONALIZING EDUCATION

Some pupil personnel services in the elementary school emphasize diagnostic evaluation, while others are primarily concerned with remedial counseling for a few children and their parents. The type of guidance I shall discuss is developmental in nature and concerned with offering assistance to all pupils.

Developmental guidance is concerned with improving the learning environment of both the school and the home, so that learning can take on personal meaning. It is concerned with reconciling uniqueness in the individual with the demands of his society and culture. The focus is on the development of both cognitive and affective learning. This theory of developmental guidance is concerned with the development of ego strength, not just its repair (Dinkmeyer and Dreikurs, 1963; Tiedeman and Field, 1965). Diagnostic focus is on determining assets and strengths.

The intent of developmental guidance is the development of competence in the learner. Grams (1966) in his definition of competence refers to knowledge, skills, and attitudes which contribute to the process of learning. Developmental guidance is concerned with personalizing and humanizing the education experience. While curriculum is primarily concerned with all of the learning experiences of the child under the direction of the school, guidance is the specific planned effort of the school to meet individual needs and provide for individual differences. It is concerned with providing opportunities for educational experiences which are appropriate to each child's purposes, needs, and rate of development (Dinkmeyer, 1968a). This is accomplished by counselor-teacher collaboration in the identification of individuality and through developing educational experiences which help meet the needs of the child intellectually, socially, and psychologically.

Developmental guidance is neither an adjunctive or remedial service. It is an integral part of the educational process, and is available for all children, not merely the deviate. Developmental guidance emphasizes accessibility. The claim is not that each child needs counseling, but that the system should be designed so each child has access to a counselor and exposure to a classroom guidance program. It is the organized effort of the school to help the child

develop his maximum potential both academically and socially. Thus, although guidance may be incidental, this approach functions best as a planned program which provides continuous assistance to the child during his school experiences. The guidance functions of counselor and teacher assist the child to succeed in the curriculum.

Developmental guidance requires the classroom teacher to perform certain guidance functions. The guidance program is only effective when there is collaboration between teacher, counselor, and administration.

Human Development and Elementary School Guidance

There has been a rapid expansion of elementary school guidance personnel throughout the nation. Developmental programs recognize that the elementary school child is at a crucial stage in the formulation of his self concept. He is coping with both social and educational tasks. It is now apparent that the early grades are crucial for developing attitudes toward school, achievement, peers, self, and society.

In their summary of a thirty year longitudinal study, Kagan and Moss (1962) stated: "The most dramatic and consistent finding of this study was that many of the behaviors exhibited by the children during the period six to ten years of age, a few during the age period three to six, were moderately good predictors of theoretically related behaviors during early adulthood." The evidence indicates that children who display intensive striving for mastery during the early years are likely to maintain this attitude toward school work.

Bloom (1964), in a summary of longitudinal studies of educational achievement, indicates that approximately fifty per cent of general achievement at grade twelve was actually reached by the end of grade three.

Perceptual theorists, such as Combs, have indicated that the person cannot behave any more intelligently than he believes he can (Combs, 1952).

Elementary school guidance develops its rationale from a number of studies related to the self concept, school achievement, and feelings of adequacy. Walsh (1956) found that the child who had an adequate self concept functioned better socially and academically. This finding was corroborated by Coopersmith (1959) who discovered a correlation of .36 between a positive self concept and school achievement.

Several experimenters, Coopersmith (1959) and Fink (1962) have obtained positive relationships between the self concept and academic achievement. Bruck and Bodwin (1962) have postulated that deficiency in self esteem may be a significant determinant of under achievement.

Williams and Cole (1968) found a significant correlation (p< .01) was obtained between self concept and mental ability. "In contrast to previous findings (Wattenberg & Clifford, 1964), a significant correlation (p< .01) of .31 was obtained between self-concept and mental ability. In addition, the analysis revealed a .31 r (p< .01) between self-concept and reading achievement, and a .33 r (p< .01) between self-concept and mathematical achievement."

A number of findings now seem to indicate that when intellectual ability is controlled, that self concept is a basic casual factor in determining achievement level in school. The evidence suggests that few factors are more basic to the child's total success than his evaluation and acceptance of himself. It appears that children who come into school with negative self concepts have difficulty in the learning situation, and this is often accentuated in the reading experience. Wattenberg and Clifford (1962) noted that "In general, the measures of self concept and the ratings of ego strength made at the beginning of kindergarten proved to be somewhat more predictive of reading achievement two years later than was the measure of mental ability."

Purposes of Elementary School Guidance

The well planned developmental guidance program has objectives for each child. "For the child, the objectives of elementary school guidance are:

1. Assisting the child in the development of increased self-understanding and increased understanding of the relationships of his abilities, interests, achievements, and opportunities.

2. Promoting increased self-direction, problem-solving, and decision-making by the child.

3. Developing wholesome attitudes, convictions, and concepts about self and others which result in the 'fully functioning child.'

4. Assisting the child to understand, plan, make choices, and solve present and future problems.

5. Developing a sensitivity to the needs of others, resulting in social interest and the desire to cooperate with others and mature in human relations.

6. Understanding the causal and purposive nature of behavior and using this knowledge in understanding self and others.

7. Assisting the child in the solving of fundamental tasks of life in the areas of work and social development and enabling him to experience success in his tasks." (Dinkmeyer, 1968b).

The Guidance Services

The following areas constitute the major guidance services:

1. Pupil Appraisal - The early identification of abilities, assets, talents, and liabilities. Information is collected by the teacher and counselor with major focus on the development of self-understanding, self-acceptance, and a more realistic self-evaluation by students.

2. Consulting - The counselor and the teacher collaborate to facilitate the learning of the child. The counselor is responsible for acquainting the teacher with guidance techniques. The counselor may be concerned about helping the teacher understand an individual or perhaps assist the teacher to work with the entire group.

3. Counseling - Counseling in the elementary school may be either remedial involving the modification of attitudes and behavior or developmental emphasizing exploration and self-understanding (Dinkmeyer, 1966). The counseling service would include group counseling directed at assisting the child to understand himself and to learn to interact effectively within the group.

4. Classroom Guidance Program - The teacher who provides planned classroom guidance experiences is crucial to the success of the developmental guidance program. The teacher creates a relationship which facilitates learning and then is involved in identifying guidance needs and creating curriculum experiences which help meet intellectual, social, and psychological needs.

5. Group Guidance and Information Services - This area includes the kinds of services that can be accomplished as effectively with groups as with individuals. It includes providing information of an educational, occupational, personal and social nature. While the counselor would occasionally be responsible for the conduct of group guidance, in most situations he would provide the teacher with materials and demonstrate the process of group guidance (Goldman, 1962).

6. Parent Consultation and Parent Education - This program helps parents to understand parent-child relationships and to share with school personnel concerns regarding the child.

The School Administrator and the Guidance of Learning

Professionals in education are prone to make many dogmatic pronouncements about how growth and learning are facilitated by various individuals, but in

the final analysis, the position of the school administrator has a major impact on the success of any program. One cannot move ahead of his leadership. It is the administrator who must provide both inspiration and a creative climate for learning.

Developmental guidance can only occur with the endorsement and active support of the school administrator. Grams (1966b) states it most succinctly: "Our view is that guidance is the facilitation of individuality through learning, and that all who influence this process function to some extent under the direction of an administrator." It is the administrator who has the power to experiment and innovate with new programs. It is from him that we must expect leadership relative to the educational process. The administrator can establish a climate which welcomes and encourages continuous reevaluation of the educational process. He not only supplies new ideas himself, but stimulates and rewards creative thinking among the staff. The administrator is involved in a continual assessment of the quality of the educational experiences of the school. It is the administrator who must attack apathy, resistance to change, and indifference. He becomes engaged in the pursuit of excellence.

The administrator must call for continuous self improvement and recognize his position exists to implement and facilitate the educational process.

Some administrators will complain that paper work and red tape stand in the way of creative, innovative thought and action on his part. This brings us to the core of the issue--the value system of the administrators. It takes a truly mature leader to delegate certain details to assistants, and to assume vital leadership position. The leader who clings to the control of trivial details may really only reflect his own fear of change.

Dr. Richard Foster, Superintendent of the San Romano Unified School District in Danville, California, in an address at the Nevada Personnel and Guidance Conference, pointed to the importance of developing an open instead of a closed communication system within the school. The open system is characterized by mutual trust and concern on the part of those involved for the activities of the organization.

Dr. Foster believes too many counselors see their roles as remedial counseling. He suggests that such activity is self defeating and ultimately does not influence the educational system itself. Foster states: "The ultimate goal of counselor activity should be the development of an atmosphere within the school which facilitates the development of wholly functioning human beings aware of the possibility of choice and the various alternatives involved in choice, who are capable of risk taking behavior." (Foster, 1968)

The type of program proposed suggests that in-service education must become an integral element in the life of the educational institution. It also suggests

that educational leaders must have a new conceptualization of the purpose of the school, and must comprehend the relationship of the developmental guidance program to the facilitation of learning. Developmental guidance should not be considered as a special service, but as an integral part of the educational program.

Guidance Leadership Responsibilities

The role and function of the elementary school counselor is often discussed as if it could be determined only within the profession. However, the actual role of the elementary school counselor is strongly influenced by elementary school administrators. It is most desirable that role and function be developed through communication with principals and superintendents.

It is essential that the personnel primarily responsible for the program, the principal and the counselor, be organized in terms of communication about:

1. The purposes of the program.

2. The types of experiences which facilitate the accomplishments of these purposes.

3. Procedures for organizing these experiences to provide continuous and sequential developmental guidance experiences.

4. Responsibilities for directing the program.

5. Involvement and stimulation of the total staff.

Administrative decisions will be based on the following guidelines:

1. A premium is placed on recognizing that the educational process is only effective when it is concerned with recognition of individual differences and the reconciling of programs and plans with the uniqueness of the individual.

2. The teacher must possess certain guidance philosophies and competencies, if the guidance program is to function at optimal level. The counselor and teacher are conceived of as a cooperative team concerned with the development of each pupil.

3. The emphasis is not on the child adjusting to the school, but in the development of an educational experience that is meaningful.

4. The guidance program must present a continuous sequence of

experiences which assist the child to meet his developmental tasks, and cope with the discontinuities between his personal development and environmental demands.

5. It is only when the total staff is concerned about the development of the child that the developmental guidance program can take effect. Channels of communication are established so that regular opportunities to plan are provided through committees. Communication may occur through staff meetings, committee procedures, and local district newsletters which exchange information.

The school administrator is crucial to the success of a developmental guidance program. He can make or break the program in terms of his philosophy and the value he places on counseling and guidance. It is the administrator alone who provides the counselor with leadership and personal support. It is he who decides the delegation of responsibilities, provides physical facilities, the amount of supplies, the type of secretarial assistance, and the size and nature of staff. It is the administrator who can establish the opportunity for regular contact between the counselor and the teachers. He arranges for and supports both formal in-service programs and the type of schedule which permits counselors and teachers to meet during the school day to discuss specific children.

The counselor serves as a catalyst for stimulating the development of the entire staff. He must be capable of and willing to supply leadership and coordination related to a number of guidance activities. While the counselor's primary role involves counseling, consultation, and the development of in-service training and guidance for classroom teachers, he will also be very concerned with the type of human relationships which exist within the school. The counselor needs not only a variety of professional skills, but a strategy for working most effectively with his total clientele.

If guidance is to become a process through which the educational experience takes on personal meaning for the child, it must be developmental in nature. It is apparent that elementary education has a real challenge and at the same time a procedure through which the purposes of education may be accomplished. However, if guidance for every child is to become a reality and not merely a slogan, it will require the full collaboration of principals and teachers.

References

Bloom, Benjamin. Stability and Change in Human Characteristics. New York: John Wiley & Sons, 1964.

Bruck, M. and Bodwin, R. F. "The Relationship Between Self-Concept and the Presence and Absence of Scholastic Underachievement" Journal of Clinical Psychology, 1962, 18, 181-182.

Combs, A. "Intelligence From a Perceptual Point of View" Journal of Abnormal and Social Psychology, July 1952, 47, 662-73.

Coopersmith, S. "A Method for Determining Types of Self Esteem" Journal of Educational Psychology, 1959, 59, 87-94.

Dinkmeyer, Don. "When Guidance and Curriculum Collaborate" Educational Leadership, February 1968a, vol. 25, no. 5.

Dinkmeyer, Don. Guidance and Counseling in the Elementary School: Readings in Theory and Practice. New York: Holt, Rinehart & Winston, 1968b, p. 42.

Dinkmeyer, Don. "Developmental Counseling in the Elementary School" Personnel & Guidance Journal, 1966, 45, 3.

Dinkmeyer, Don and Dreikurs, Rudolf. Encouraging Children to Learn: The Encouragement Process. Englewood Cliffs, N. J.: Prentice-Hall, Inc., 1963.

Fink, M. D. "Self Concept as it Relates to Academic Underachievement" California Journal of Educational Research, 1962, 13, 57-62.

Foster, Richard. "Superintendents View the Counselor Role" Caps Capsule, 1968, vol. 1, no. 2, p. 3.

Goldman, Leo. "Group Guidance: Content and Process" Personnel & Guidance Journal, 1962, 39, 6.

Grams, A. "Facilitating Learning and Individual Development: Toward a Theory for Elementary Guidance" St. Paul: Minnesota Department of Education, 1966, (b) p. 169.

Kagan, J. and Moss, H. Birth to Maturity. New York: John Wiley & Sons, 1962, p. 266.

Tiedeman, D. and Field, F. "The Science of Purposeful Action Applied Through Education" in Guidance: An Examination, by Mosher, Carle, Kehas. New York: Harcourt, Brace & World, 1965

Walsh, A. "Self Concepts of Bright Boys with Learning Difficulties" New York: Bureau of Publications, Teachers College, Columbia University, 1956.

Wattenberg, W. W. and Clifford, C. "Relationship of Self-Concepts to Beginning Achievement in Reading" Child Development, 1964, 35, 461-467.

Wattenberg, W. W. and Clifford, C. "Relationship of the Self Concept to Beginning Achievement in Reading" Detroit: Cooperative Research Project #377, Wayne State University, 1962.

Williams, Robert and Cole, S. "Self Concept and School Adjustment" Personnel & Guidance Journal, 1968, 46, 5.

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(Transcript of Speech Presented at the Conference)

THE CLASSIFICATION OF LEARNING DISABILITIES

First, I wish to talk about classifying reading disabilities. When one classifies anything in science, one classifies attributes or qualities of object or people or things, not people themselves. I think past educators have made a great mistake because they pigeon-hole rather than classify the facets of children. Single groups are meaningless. This is very important because it means that a child can have measles, toothache and the tummy ache all at the same time. Thus, children can have multiple problems; one doesn't say 'this child is dyslexic', or 'this child is mentally retarded,' because that is pigeon-holing a whole child who may have several problems. I had a girl the other day who was psychotic and she's been labeled mentally retarded with an I.Q. of 45 on the Stanford-Binet. No psychologist should give a psychotic child a Stanford-Binet as it is a very verbal test. On the WISC Block Design, she got a scaled score equivalent I.Q. of 112 and yet this girl is 12 years of age and she had been consigned to a class for the mentally retarded all of her life. And only now, with special treatment, has she begun to come out of her psychotic state and learn up to her intellectual level. This is a sort of a warning for pigeon-holing children without seeing them as having complex problems, difficulties, assets and talents.

Turning to reading disabilities, many kinds of children with multiple difficulties have reading problems. We have our EMH children, our aphasic children and so on depending on their dominant symptom or attribute. However, I want to talk about a group of children who are called 'dyslexic'. These children are reasonably intelligent and their reading disability is not primarily attributable to an emotional disturbance or a lack of intelligence. There are quite a number of these children in our schools. I've found that there are four major groupings of these children. First, come those that I call the Communicative Dyslexics, or to give them their full title, Primary Emotional Communicative Dyslexics. The reason why these children cannot read properly and sometimes not speak properly, even though they are intelligent, is the lack of communication which has occurred between them and their mothers (or whoever was minding them as infants) during the critical period of language development from birth to five

years of age. If a child does not receive sufficient language stimulation from birth to five years of age, he will not learn to speak properly, or learn syntax, or learn all the conventions of the language. If he does not reach a certain level of being able to handle auditory vocal language, he will not learn to read easily. Remember, of course, that when we talk about reading disability cases or dyslexia cases, most of these children can read to some extent, even if they just know a few letters of the alphabet. They are only rarely complete non-readers. More usually they are two or three grades behind what they should be.

The second major group are those children who have some kind of Minimal Neurological Dysfunction. This does not mean that they have an organ deficit, that there is something wrong with their ears or their eyes -- that is a different field of special education. Neurological Deficits can be broken down into several sub-categories. The third group of children I called genetic dyslexic children. These are usually boys who have just not inherited sufficient verbal ability to cope with language and so they have trouble later on with reading. However, they may have inherited other kinds of intelligence and abilities. The fourth group you will know fairly well. They are the culturally deprived or socially disadvantaged. These children differ from the communicative dyslexic, in that 'cultural deprivation' is a cultural phenomenon, and not a phenomenon which devolves from the <u>individual</u> family. In the first group, the Communicative Dyslexics, you get many middle class mothers who do not talk to the children sufficiently. But deprivation is usually a <u>group</u> phenomenon in the ghetto or in rural areas. I will not be talking about them very much because it is another field of study.

Let us now go back to the first group, the Communicative Dyslexic group. I've already said that there has been a lack of communication between mother and child in the early years of infancy of these children. Why then does the child not learn the conventions of the English language, and which conventions does he not learn? Almost all the facets of a particular language have to be learned at the mother's knee. The ability to <u>acquire</u> a spoken language, any language, is in-built. The evidence is pretty overwhelming now. If any of you are interested in that evidence, please read Lenneberg's book, "The Biological Foundations of Language". How does a child at three years of age, who cannot do the simplest mathematical calculation, able to speak his mother tongue, one of the most complex things on earth. If the capacity to acquire a language fluently is not in-built then it's a remarkable learning phenomenon. However, while the capacity to acquire a phonetic language is in-built, the <u>particular</u> language and its conventions is not. They have to be learned, whether you learn French, Chinese, Russian or English. Incidentally, there is not very much difference between these languages from the <u>auditory-vocal</u> point of view. We get so used to thinking of language as something written,

something printed in this day and age, that we forget this has been a common phenomenon only for the last 200 years. Language is really an auditory-vocal system, not a reading system. Nearly all languages are the same, only the phonemes being in a different sequence. The syntax, the groupings of phonemes and their sequences are, of course, very, very important. Phonemes are the little bits of sound that make up the word (/T/ is a phoneme). Phonemes are sequenced in different orders to form words and sentences and any child who does not learn the sequences of phonemes which are used in his native language will surely have reading and spelling problems later. Different languages use different sets of phonemes; the French use quite different ones to English. In Zulu or Bantu, they use clicks all the time. Such children will clicks all the time. Such children will click away merrily in conversation for hours on end. This illustrates that there are different sounds which the child has to learn. Thus, the sound /hew/ which is common in French is not used in English, and although you'll find here babies saying /hew/, it becomes rapidly extinguished in the English speaking children. Now the first types of mothers (and this is where we get into the actual relationship aspect of the communication) are the Disinterested Mothers. It is a common pattern for mothers who are socially inclined, who have many external activities or who take part in business, to leave their children in the care of nannies or child care minders who do not speak fluent English. Now in England, of course, there are many 'au pair' girls who come over from the continent to learn English and these French, German and Spanish girls will work for a pittance taking care of the infants while mother goes to work. The girls are trying to learn English and so is the baby and so they both finish up with broken accents. The infant may develop a poverty of language which it never overcomes. Depressed mothers are rarer. There is, as you know, the phenomenon of depression in a few women after they give birth to children, and this depression may last for quite a long time. It may also be aggravated by other events in the family. The depressed woman does not talk very much and she certainly does not smile and so reinforce the language learning process in infants. Smiling at the child, laughing with it, talking and gurgling all help in language development but a depressed woman will tend to produce a child with communicative dyslexia. This is particularly the case if the baby has other characteristics which predispose it to reading disabilities, for example, a slight neurological dysfunction. Of course, to cope with the latter condition the child will need over-stimulation. I often wonder how many children with very mild neurological dysfunction of some kind have garrulous mothers and turn out to be quite normal, linguistically speaking. Thus, a slight dysfunction can be compensated for by a mother who laughs, plays, and jokes with her child all day and every day. The next sub-group are the Angry Mothers. In some cultures, this group causes a lot of trouble. The child associates anger, aggression and punishment with words and language generally.

Such a child will turn away from any learning situation in which language occurs. Usually, the child finishes up emotionally disturbed as well, so complicating the problem. Of all the mothers I have described, the angry mothers are the most easily detected.

There are others possible - for example, twins have a tendency to reading disabilities, as demonstrated by Day back in 1932. She found twins tend to have a slower and less rich language development than other children, presumably because the mother leaves them together to talk to themselves because it's more convenient. If you've got one child, you feel the responsibility to look after him, to talk to him and play with him. When you have two of them that are happy together and stimulate one another, the mother is tempted to let them get on with it and therefore, sometimes twins develop a private language of their own. Not all twins have a language probelm but it is a tendency in certain kinds of households. Institutions sometimes produce these Communicative Dyslexic children. It is fairly rare these days because children tend to be placed in foster homes and the old fashioned orphanage no longer exists. Children living in a foreign country may have problems particularly if the nanny there is a foreign woman and for the same reasons that the au pair girls cause language learning problems in children. One little boy was put in the EMH school in London long before I came to see him. He was supposed to be mentally retarded but I found that he had a spatial I.Q. of something like 140, which any respectable architect would be proud of. He had been brough up in Cyprus and although he could speak fluent Greek and Turkish, nobody had ever bothered to find this out. He had only learned Cockney on the streets of London since he was about four years of age. When he came to me at eight years of age, he had only been learning English for three years. He could speak English quite well, but not sufficiently well to read it. Of course, he never spoke Greek or Turkish in school and nobody ever bothered to find out what the problem was except that the teacher said he was very good with his hands. (So was Sir Isaac Newton) The remediation of Communicative Dyslexic children calls for a full language development program. This should contain much conversation and be as auditory-vocal in nature as possible. Silent tutoring is always wrong; <u>all</u> tuition should involve a great deal of linguistic communication between the teacher and children. I would emphasize that point. A training in syntax (linguistics) would be of a great help; there's a book by Lefevre (Linguistics and the Teaching of Reading - McGraw-Hill) which I found useful for teaching children syntax. Some of these children do not even know the formal, conventional ways of asking questions, starting with the words "what" or "why". All these conventions have to be taught quite deliberately.

The next major group you will remember have some Minimal Neurological Dysfunction. The word 'minimal' applys to the word dysfunction,

not to the word neurological. I say this because some people have criticized the term minimal brain damage or minimal neurological dysfunction by saying that the lesion may not be minimal. However, as explained, the word 'minimal' applies to the dysfunction and indicates there is only a small degree of malfunction in the child. Usually, it is only detectable to people trained to diagnose these symptoms. A child was reported in a British journal not long ago who, at two years of age, spoke a number of words and strung some together in brief sentences. He could run about, was toilet trained and in many ways seemed a perfectly normal child from all outward appearances, although there were little signs of neurological dysfunction. However, when the neurologist shone a 'flashlight' through the child's head, there was no cortex there. Although I do not think that his development continued much longer, the point to be made is that it is quite amazing the way nature can compensate in terms of actual neurological factors. Sometimes just a tiny lesion will cause a great deal of trouble by interference and yet sometimes a whole hemisphere can be missing and the child is normal. It's there because the problem is as much the interference as the actual lesion.

Some people say "Well, if the child has got some kind of neurological dysfunction, you can't do anything about it and that's that." Well, that is not true. We have been training spastic children and other dysfunctioning children for years with verying degrees of success. In New Zealand, I once heard a Dr. Carlson (I think that was his name) from Yale, who was a paraplegic himself. He had been trained to walk as a boy but sometimes he would be so engrossed in conversation with a colleague while walking across the campus, that he would just collapse on the grass. He would have to get up and say, "Look, I'm sorry, I just got so excited about what I was saying that I just forgot to walk." This is a very, very important point. One can train the brain to do something artifically which in an intact person develops naturally and that is what we do with learning disability cases. We train them to do artificially those functions which do not develop spontaneously and naturally through specific training lessons. The prognosis for children with neurological dysfunction is often good. As a matter of fact, usually the prognosis in neurological dysfunction cases is much better than it is, say, in genetic dyslexic cases. Very often a neurological dysfunction child has inherited a natural aptitude for language. Although the words are a little 'mixed up', language is in there so to speak. You draw it out, build on it, and put in the missing pieces.

We remediate the deficit area and we also reinforce through the intact area. In other words, if there is a visuo-spatial deficit, we pick out the actual problem and train it using, for example, a Frostig Program for Visual Perception. In the auditory modality, these children may

have problems of auditory discrimination, auditory closure or auditory sequencing memory. They may have problems in verbal conceptualizing, the waxing and waning of sounds and noise interference. Remember there is nothing wrong with their ears; their problems are inside the brain. I consider that CNS deficits of hearing and speech are the most important areas in learning and reading disabilities. We have not paid enough attention to the basic problem of language and speech in reading problem cases. I always say reading is ninety percent spoken language. Reading is largely an auditory-vocal function and the fact that we use our eyes is almost incidental. Blind children use their fingertips to read so the eyes are not even essential. However, if you ever tried to teach language to a child who has been congenitally deaf from birth, you will know how extremely difficult it is. Therefore, I want to emphasize that in reading disabilities, the major problem in most cases, lies in the auditory language area.

Motor, kinesthetic and tactile problems form the next subgroup under the Minimal Neurological Dysfunction heading. These are closely related to vocal deficits. Articulation is very important in language development and so once again I would emphasize the training of speech and clear articulation. Training clear articulation within a good phonics program will do a great deal to clear up many of the reading problems which children have. Obviously, a child who cannot discriminate between phonemes cannot understand the graphemes representing those phonemes. If the child has not got the basic knowledge of what each phoneme is when it's articulated clearly, he cannot sequence them. In a research which will be published in the "Journal of Learning Disabilities" shortly, I have found that in spelling, the visual sequencing of letter forms is almost unimportant. Letter by letter sequencing of designs has little to do with spelling. Sequencing in spelling comes from articulation. It is motor-vocal activity which sequences the sounds in spelling, and sequences the letter-designs.

Cognitive problems and problems of integration are next on the MND list. Penfield and Roberts (for those of you familiar with neurology) say that thinking probably takes place in the centrencephalic system in the brain. I have found a few children suffering from what I call minimal autism. It would seem that all of their sensory apparatus, and I include the cortex, is intact. They can hear clearly, they can see clearly and so on, but when we come to their computer which processes this information in terms of relationships, there is something 'missing'. They are not usually classified as mentally retarded, because the children seem intelligent and they seem aware of what is going on around them. They may sit in front of a painting and stare at it for many minutes, they enjoy music but they will be behind in their school work. Such children seem to have something wrong with the integrating and reasoning part of their brain. Once again, the

answer is to remediate the deficit area and train these children to think in terms of relationships. This can be a very difficult business, but the essence of it is to explain relationship systems (e.g., time, weight, mathematics) in a concrete logical way.

Moving on to Genetic Dyslexia, we find that the main symptom is a poor auditory sequencing memory. They may also have inadequate auditory closure, and their phoneme-to-grapheme memory association is almost non-existent. (A grapheme is the written equivalent of a phoneme.) The sound "I" can be spelled by the graphemes eye, I, i, igh, ae and a few others, as well. Thus, we have several graphemes which correspond to a particular phoneme, while just to confuse the issue each grapheme also has several phonemes associated with it. The letter 'e' for example, has about 4 or 5 sounds which it represents. This makes the orthography, as it is called (the phoneme-to-grapheme matching) very irregular in the English language. There's no way that the child can remember which phoneme goes with which grapheme in a particular word, except by using rote memory. This is the dyslexic child's big problem and it's a particularly thorny problem for genetic dyslexic children, because they have not inherited a good auditory memory. Their vowel discrimination may be particularly bad, while their auditory discrimination as a whole may also be poor. Their auditory conceptualizing will also be inferior to visuo-spatial conceptualizing. They sometimes have a slow speech development. (Usually, it is very difficult to assess what a child's speech development has been.) Very often, the child has an inadequate speech feedback, that is, they do not hear themselves speaking phonemes very clearly, because their articulation is so poor. They may also have overall 'maturational lag' physically as well as psychologically. I want to emphasize that there is nothing wrong with these children -- they are usually boys. The fact that they do no learn to read easily, and Einstein was one of them, is the result of a Law of the Land which says every child must learn to read. If we passed a law which stated that everybody had to be able to draw an accurate likeness of a human face in order to get by in school, how many artistic dyslexics would there be? Or if everyone had to be able to write music to the level of the simple waltz, how many musical dyslexics would be in this room? This is what we are demanding of all our children and it is a highly artificial situation. Simply because a child cannot learn to read doesn't mean to say that he is any more 'brain damaged' than the child who cannot write a simple waltz. It is just not their talent. In this context some reading problems are the outcome of compulsory literacy in education. There is nothing necessarily wrong with the brains of such children or their personality or anything else. They may be very incompatible with the school system and may even turn out to be delinquent, because along with the conventions of language they do not easily absorb other conventions; that is a theory I have for which there is some evidence. I want

to emphasize, however, that there is nothing necessarily wrong with the brains of genetic dyslexic children. After all, learning to read is a highly artificial function which is not inborn. We tend to think that the human race has mutated to learn to read. It has not. It certainly mutated to learn to speak, and to hear auditory vocal language. Is there something seriously wrong with two-thirds of the human race at the present moment because they cannot read. We forget that 200 years ago even in Western countries, 95% of the population could not read. Reading is not a natural phenomenon; it is an artificial acquisition which has to be taught in a formal fashion. One does not pick it up naturally. The child of three has usually acquired the whole auditory-vocal language, spontaneously, without formal tuition. By contrast, to learn reading, you have got to go to school and work diligently in a formal program. If you leave the child alone, it is unable to learn to read. Genetic Dyslexia is usually a masculine problem. It would seem that boys as a whole are much more susceptable to having a language deficit. In Maccoby's book on "The Development of Sex Differences", there are 22 research studies which have been carried out on different language functions involving children three and one half years of age and under. Of these 22 studies, in 17, the girls were superior to the boys in language functions, while in the other four, there was no difference. In none were the boys superior. In the same book, if you examine the research on spatial ability, you find the boys are significantly superior to the girls. Spatial ability is a talent which architects, doctors, dentists, artists and farmers have. It calls for the manipulating of objects in space intelligently. It is a whole field of non-verbal intelligence. These genetic dyslexic boys seem to do quite well spatially. I analyze the WISC in a certain way: Block Design Object Assembly and Picture Completion added together give you a non-sequencing visuo-spatial score. (These three tests just require the manipulation of objects in space intelligently at random-not sequencing.) Genetic dyslexic boys always get a reasonable score in this area even though they are not able to handle language. The reason is that they have a brain which tends to be balanced in terms of hemispheric functions. They have a tendency to mirror image. Genetic dyslexic boys, whose brains tend to be equally balanced, tend to be ambidextrous or left handed, because the right side of the brain is the visuo- spatial side and because both visual fields are required for seeing or manipulating anything which is visuo-spatial in nature. These boys tend to scan at random in three-dimensional space (which you do when you are driving your car, a highly visuo-spatial operation.) We all forget that 90% of our lives are not spent in verbal activity but in visuo-spatial non-verbal activity. Thought is nonverbal. What language does is code thought; it codes with labels (words) the images and concepts for the purposes of communication both internal and external. Words facilitate thought but they are not thought. Thought is the manipulation of objects and ideas and concepts

which have reality value, and therefore, the idea of 'verbal intelligence' is almost a misnomer. All we are testing is the ability of a person to code their thoughts. It is only when we test non-verbal intelligence that we begin to assess true intelligence directly. By contrast with genetic dyslexic people, the excellent linguist has a tape recorder type of auditory-vocal functioning. I've heard people in Europe who can speak five or six languages fluently. They pick them up one after the other without any trouble. Genetic dyslexic boys find it difficult to pick up one language and remember it. Their vocabulary may be adequate but their verbal fluency is not. Women have this capacity of verbal fluency in language (which males do not) and that is one of the reasons why in centers for reading disability cases, the proportion of boys to girls is four to one -- and almost invariably that girl has some kind of neurological dysfunction. In the Center in London for dyslexic children, we had 38 children and 36 were boys. Why do women have greater verbal fluency (a fact well established experimentally)? Going back to evolution again, we find that if men did not have good spatial ability in battle, they were dead. If women could not communicate, raise their family well, and manipulate people they did not reproduce either.

Genetic dyslexic boys may have a slight overlay of minimal neurological dysfunction, or they may have been brought up in a family where there has not been much communication in the critical period of language development. I have had several such cases of multiple causation which are very difficult to remediate. I would make a plea for screening of all children at school entry, not just for dyslexia but for all kinds of disabilities. I keep thinking that children have a birthright to be evaluated thoroughly in kindergarten in order to prevent problems ever occuring. Some problems are even detectable before the age of three. Dr. Schiffman has said that the earlier you get these cases, the easier it is to remediate and (as a good school administrator) he also says it is less expensive. Thus, screening may take a little bit of investment money initially but later it will save you many times that investment because the older a learning disability child becomes the longer and more difficult is the remediation process. It pays to screen early.

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(Transcript of Speech Presented at the Conference)

DIAGNOSIS, PREVENTION AND REMEDIATION OF LEARNING DISABILITIES

We can start by talking about diagnosis and in this respect, I would like to discuss establishing a team approach to the diagnosis of both learning disabilities and of most other psycho-educational problems children have. All children probably need help at some time or another and not only on the emotional and motivational side, but also on the academic side. Hardly any children work to full capacity or enjoy working to capacity. The children who have learning disabilities are the ones who are most in need of our attention. In the assessment team, I would have a psychologist, a speech correctionist, a pediatrician, and educator and a social worker. These people need not all be full time, particularly the pediatrician. The educator is my first choice for being in charge of the team. Neurologists, pediatricians and other people are not appropriate when the objective of the team work is to establish educational remediation.

Medical people can contribute a great deal but they cannot prescribe an educational course in remediation. The speech correctionist is very necessary because most children with reading, spelling and related problems have their origins in the original learning of language; they are language processing in the brain and this is the main area where there is a breakdown. The speech correctionist, particularly if she broadens her horizons, can do a great deal to help such children. The social worker is very necessary to find out about the family relationships, etc; if there are any emotional problems, these will need investigation, handling and counseling by her. The pediatrician should give the child a thorough checkout, as far as his health is concerned and recommend other medical services if they seem necessary. Certainly, I would suggest that every child should have a thorough examination of their eyes and hearing. Sometimes, I have seen children of 12 and 13 years of age who have had severe reading disabilities all their lives and they have never had an examination by an opthalmologist or optometrist. They may have a hearing loss in certain frequencies, which can be remedied and that might be the only problem. If necessary, the child can go to the hospital to have the wider examination (if the pediatric-

ian suspects deficiencies) for blood analysis, EEG's, neurological examination, etc. I have not put a neurologist on the team permanently because several neurologists have said to me that most clinical psychologists who have been thoroughly trained can do a better neurological examination than most neurologists.

No longer are we in the single discipline, those of us who work in this field. We have to broaden our outlook and knowledge and become 'experts' in areas such as neurology, speech and language. The teacher too, will have to do this; she needs to start thinking of the children a little differently, a little deeper. She should know what a neuron is, she should know where the speech areas are in the brain. She should know that speech is largely controlled by both motor functions and kinesthetic patterns in the brain. Such knowledge will help her to understand the child and her work with the child. It is not as difficult as it sounds for there are plenty of popular textbooks which are written for people on a lay basis, so they can understand without technical language.

Usually, the total time of diagnosis lasts somewhere between 10 and 20 hours per child. It seems diagnostically criminal that the child should only be given a WISC and reading test. If they did the equivalent in hospitals when your child had some kind of physical illness, you would prosecute and demand compenstion for negligence. No longer can we just sit back and spend half an hour with this child and half an hour with that child, then prescribe remediation. Hours and hours of work on the child are required to find out exactly what is wrong. Education tends to be still in that phase where you just say a child has a fever and a shot of penicillin is given.

Diagnostically, first of all I screen right across the board with batteries of tests and examinations. We 'clear' the child in certain areas if they do not have problems there. But wherever I suspect they have a deficit, I start moving in with finer and finer tests and examinations (even impromptu ones or informal ones) to find out exactly what is wrong. Then I prescribe remediation on the basis of the findings. The idea, all the time, is to look for discrepancies between the child's potential and performance. Quite often I have to guess the potential, but usually I can find out some way to get an idea of what that child's potential is.

For the sake of convenience, I have broken the diagnostic areas down to four levels, each with its tests and examinations. First comes the Academic Level, with which teachers are familiar. Test the child for achievement of attainment and use such tests as the SRA Achievement Test, the Metropolitan, California or any similar test which is fairly

well standardized. The SRA is the most recent one to be standardized and has a slight edge on the others and you will get an across-board assessment of language, arithmetic, spelling, etc. We also give the Gates McKillop Reading Diagnostic Test to find out both the child's level of attainment and to discover diagnostically what is wrong with the reading itself. I also use phoneme/grapheme matching cards to test the child's phonics. There are also various 'phonic surveys' which one can use for testing whether a child knows his sounds or not. Then I give a spelling test. There are very few which are satisfactory. The Ayres, we use sometimes, and one or two English ones.

Next, we move over into what I call the Congnitive-Intellectual-Sensori-Motor Level and this is where the educational psychologist will be familiar with the types of tests we give. The WISC and ITPA are given and I train learning disability teachers to give these. The idea that teachers are some kind of inferior people who are not up to the psychologists in their own profession, is to me repugnant. I see no reason why teachers should not be trained to give many tests. I give the WISC, of course, but never the Stanford-Binet which is too loaded with verbal material. (It leaves a lot of learning disability children with I.Q. scores which are much lower than they should be in terms of this in what I call their Spatial Ability.) The WISC, of course, will assess spatial ability very well. I break the WISC down into three sets of scores. The Spatial score is comprised of picture completion, block design and object assembly. Using the scaled scores, these sub-test scores would add up to 30 on the average, (the average child would get the scaled score of 10 each). Above or below this mean is indicative of superior or inferior spatial ability. The Conceptualizing score is made up of comprehension, similarities and vocabulary. These, too, can be compared because there are three of them and they add up to 30 as well. The Sequencing score is made up of digit span, picture arrangement and coding. Many children with learning disabilities, will have very low sequencing scores. These give a far from perfect diagnosis but as we have to give the WISC, we might as well make the best of it. (As a matter of fact, I am most upset about the standard of almost all tests that are available for all children and I certainly would like to see set up, sometime, a National Institute for improving most of the tests we use.) The ITPA, (the Illinois Test of Psycholinguistic Ability) will assess the child's sensori-motor functioning in various areas, his auditory functioning, his visual functioning, particularly in terms of memory, and his vocal functioning. It will also assess auditory closure and auditory sequencing. By itself, it is not a very reliable instrument, even the new one which has just come out, but it is the best we have in the field and it is an excellent first attempt.

By Cross Analyzing the ITPA, the WISC and other tests which I am going to give you in a moment, we learn a great deal about the child's psycholinguistic functions. (Psycholinguistic means those psychological functions which are

the basis of language, that is those neurological functions of hearing and seeing in various ways.) The next test you probably know very well, the Frostig Test of Visual Perception. It can be cross-analyzed with the Spatial scores on the WISC and various visual tests on the ITPA. We also give the Auditory Discrimination Test, namely, the Wepman or one from Drake at the Perceptual Education Research Center in Massachusetts. The next test is the Memory-for-Designs Test in which the children are shown sets of designs in turn, the card being taken away at which point they have to draw the design. I have found in my own recent research, it is the drawing of the design which is fairly important to reading and spelling. There are other tests like the Bender Visuo-Motor Gestalt in which the child has to copy the design. It is rather useful to give both the Memory-for-Design and the Bender, so you can see the difference in copying and remembering abilities. I have found that spelling is correlated with simplifying designs (not very highly but it is significant) and this fits in with maturation theory about designs, namely, that children draw more and more complex designs as they get older. Therefore, as far as the visual determination of designs is concerned, the children in question are not remembering the complexity of designs over a short period of time. This means, that in spelling they are not remembering the letter shapes correctly or sufficiently quickly. I also found that mirror-imaging was correlated with the choice of the original correct design so there is nothing abnormal about it as a symptom.

To investigate laterality, I have developed some tests which are of unlearned handedness. I did find something quite startling--that unlearned ambidexterity (the use of both hands in unlearned tasks) is highly correlated with spelling ability. I also found that unlearned ambidexterity is highly correlated with balance and this, too, is highly correlated with spelling. This would suggest the brain functions very well in these areas--coordinated visual functioning, motor functioning, vestibular functioning (balancing functioning). The brain which can handle all this and integrate it well is also a brain which spells well. I am not saying that the balancing is a cause of good spelling. The brain, which is efficient in coordinating balance, can also coordinate spelling. I do not think walking on the balancing board is going to make much difference to a child's spelling ability--at least not half as much as if you teach it spelling.

Let us now consider 'direction.' The Money Road Map Test of Direction Sense is used to find out whether the child knows 'left' or 'right.' A child gains knowledge of left and right as the conceptual process and it has little to do with the brain, so to speak--it's more a matter of verbal practice. Some children do not have the concept of direction and there is a great difference between the child who does not know labels for 'left' or 'right,' and the child who is truly disoriented in space. The two are quite different. Most genetic dyslexics can never remember which is left and right. They just cannot remember the hands which go with the words. We give the Benton Left-Right Discrimination Questionnaire to find out just how much a child

does know left and right on himself and other people. I don't necessarily retrain him on these things. By the way, if you do not think it is difficult to remember which is left and which is right, how many know which is 'port' and which is 'starboard'? I just wanted to show you that such words are verbal labels.

The Motivation/Personality/Emotional Level of activity is the next one and this is where the psychologist comes into his own. I give a Family Relations Test, which is an English test, in which the child mails little card-letters to his family by putting them in mailboxes. They are for Mother, Father, Brother, or Sister, and help find out details of the child's history. We also send home Family Information Forms which the mother is to fill out. She takes them home so that she can talk to her husband and family, get out the baby books and talk to the pediatrician. One gets much, much more information and much more detail through this procedure. I also give the Anxiety Scale to try to get measures of just how anxious the child is about school work and what school situations trigger it. Quite often, I simply ask the child, "What is bothering you at home or at school?" We Psychologists sometimes get so enamoured of our own tests and their indirect approach that nine times out of ten we spend several hours getting information from the child we could get in five minutes if we just asked him point blank. Most children will open up within ten minutes if the atmosphere is friendly and tell you their whole life story, their problems and everything about school and home. This is much quicker than the TAT. Now, I'm not saying these other tests should not be given; but I am suggesting that a direct approach should also be tried. On this Level, a social worker goes to interview the family with her own form, (a check list) and she inquires about all the delicate 'skeletons in the closet.' We need to know about the true background of the family, whether there has been a broken home, whether there have been various problems in the family and what they are like. She asks if there has been any criminal activity in the family and if the father has been in jail. She can inquire about the sex education of the children and any sexual problems. We need to know the history in the family of learning disorders of various kinds. Could Father get through the 7th grade? It requires a very clever social worker to get this type of material. The social worker must have structured interview to go through in a deliberate way.

I investigate the Neurological, Physiological and Motor Levels of activity. Most of these come from the Family Information Form, the family pediatrician, birth histories, and so on. The aim is to find out as much as we can about the pregnancy, the birth and any illnesses the child may have had. Has the child a normal EEG? If the EEG person is sophisticated enough, they should wire the child up to get muscle artifact information. By putting electrodes above and below the eyes and getting the child to read, he can find out whether he has flickering eye movements. This is very important information (particularly in terms of eye movements) for the diagnosis of Minimal Neurological Dysfunction. The teacher can supply quite a lot of information about the

clumsiness of the child and how he is in physical education, for example. The teacher can provide some training in gross motor activity, not that that is going to help him to read very much, but it will perhaps help to improve his personality to a point where he can get a better self-concept. The speech and hearing expert should give a complete rundown on articulation, on audiometrical information, on language assessment and on the fine discrimination of sounds. Several studies have now shown that most learning disability children have an inability to discriminate melodies. Therefore, if you give the child the Melody Discrimination sub-tests of the Seashore or Bentley Musical Tests, you can quickly assess a child's ability to discriminate melodies. In Sweden at the high school level, students are selected for foreign language classes on the basis of melody discrimination tests and they have been doing this there for many, many years. Words are series of sounds, series of notes in a sense; very, very complex notes and noises. Words are noises in sequence just as in music and if you can discriminate one, you can discriminate the other. Therefore, speech correctionists, assessors should get to work and try and find some melody discrimination tests for diagnostic purposes. Genetic Dyslecic boys fall right down on melody discrimination.

When I have all this information from these tests, I cross analyze it. I do NOT look at the tests; I look at all the data from the tests, all the sub-test information which I cross-analyze in terms of the child. Learning disability diagnosticians have to learn to know what is going on in the child's brain and in his senses, and to think of the child in these terms. Thus, for example, by cross analyzing all the data, I learn that the child has an auditory deficit across all the results. It may be a particular type of auditory factor. For example, the child may be falling down on auditory discrimination, therefore, I move in with more auditory discrimination tests. I try and find out just what sounds the child is not discriminating accurately and get right down to the actual phonemes which the child cannot discriminate. Then I teach him them. It is just like the doctor giving x-rays, blood tests, running some cultures, and finally finding out that the virus is such and such at which point he says to use such and such a drug or such and such a physical treatment, and writes a series of prescriptions. This is the way I work--exactly on this medical model. It requires a tremendous amount of effort and painstaking work. Even so, ten hours of diagnosis may save you dozens of hours of tuition--it is an economic proposition. Now, by funneling in with appropriate tests, I find out exactly what is wrong and then write remedial prescriptions which are the kind of 'turning inside out' of that particular test. If, for example, the child has a figure-ground visual problem (which will have shown up on the WISC picture completion, the Frostig figure-ground test, and the Memory-for-Designs test), he will usually have trouble picking out a letter on a page of letters. He will get confused and will need practice so we will then start training the child on figure-ground work. We will start with the simple examples (such as in the Frostig). Large print

reading books might also be used so the child has nice big letters to read and there is less image confusion. You can use your primary typewriter rather than buy material. You have got to give the child a lot more experience in his deficit areas. Obviously, it is not possible at this point to go through every possible specific disability that a child will have and set out the complete remediation required. That would necessitate several textbooks of information. I have written much of it down and the book will be published in 1969 by Pegasus Books, New York.

Very often the child does not fall into one single diagnostic category. When we talk about the attributes of children or their characteristics, some children will exhibit multiple symptoms. Many neurological dysfunction cases (I suppose probably two-thirds of those children) have a general impairment of the brain because often during pregnancy, at birth, or as a result of an illness, damage occurs throughout the cortex and possibly to other areas of the brain as well. This means these unfortunate children are going to have cognitive and emotional deficiencies of all kinds. These will call for a lot of training and to cope with this situation, I recommend 'Multi-Track Remediation.' During a forty-minute lesson, break the lesson down into tracks of remediation--separate groupings of five minutes of this prescription ten minutes of that. Never sit the child down with a reading book and give him forty minutes of time to puzzle out the words. Have the child follow prescriptive exercises on several levels in parallel. Just because you are training a child in visual discrimination or auditory sequencing, does not mean you cannot also be teaching it reading at a simple level as well. So the child may do five or ten minutes of reading (actually I teach writing and spelling far more than I teach reading), five minutes writing stories, ten minutes of spelling and about ten minutes of other activities. With this multi-track form of remediation, several tracks are proceeding at the same time and the children learn on several levels. Levels can be phased out, or phased into one another as their specific objective is fulfilled. The Neurological Motor Level activities are usually phased out first. But, you may also be teaching Academic Level reading and you certainly have a Motivational Level program at the personality level. The latter improves a child's self-concept--hopefully. A psycholinguistic training program may also be going at the same time.

Let me now present the case history of a child with a neurological general impairment. Both his mother and father are pediatricians. She had a placental deficiency for about the last two weeks of the pregnancy and so Simon suffered from just about every kind of minimal dysfunction of the senses, muscular activity and intellectual abilities. His brothers, sisters, mother and father were all brilliant. His father, actually, a professor of medicine. Simon tested out with a WISC I.Q. of around 120, but I suspect it should have been 150 or 160 if it had been up to the family average. Note that if the family had been of average intelligence, Simon would have been

mentally defective. A drop of 30 or 40 points in the I.Q. from 100 brings it down to 60 or 70. Simon was bright but not as bright as his family. In terms of language, Simon had a satisfactory memory, so basically the prognosis was good. His parents had brought him up extremely well. He had five or six brothers and sisters and they all looked after him and were considerate but they did not pamper him. Simon is an excellent example of how all these children should be brought up ideally. He had no emotional problems although he cried easily and was easily upset. He has no attention span problems although he found schoolwork difficult. We put him on a multi-track program and he learned to read very, very quickly. We also got him placed in a little private day school where he was not bombarded with stimulation, as he would have been in the public school. Simon progressed very rapidly. He had to have training in almost every one of the areas which I have mentioned above. We removed the 'stumbling blocks,' in his multi-track training, and it took a very short time to do this. Within six months he was reading way above his grade level; well up to his I.Q. level.

The clarity of articulation is very basic. The child must learn phonics, understand them, hear them and differentiate them. Phonemic learning is a first step in early language processes. It is later in school that the child has to associate graphemes (letters) with his phonemes.

The next topic is form constancy, object constancy and mirror-imaging. Most of us are brought up so that when we see an object, it stays the same from whichever angle we look at it. If we look at a car or a table, we say it's a table whichever way we look at it. When we come to <u>printed language</u>, this law of object constancy breaks down. In other words, if you 'climb around the back of' a "b", it becomes a "d". It is no longer a "b". Therefore, the direction in which letters point relative to your face, is important. It's crucial because its direction determines its meaning. Thus, these letters and words which can be mirror-imaged will be a problem for the child who is reliant in his everyday life on object constancy. Usually, such children are genetic dyslexia boys who will require a great deal of letter direction training. We have to teach genetic dyslexic boys that it <u>matters</u> which way certain letters are pointed. One of the simplest ways I know of helping here with the "b" and "d" problem is to use the word BED. In the word 'bed', the two loops on the 'b' and 'd' point inwards and in the shape of a bed. If you just draw a line across the top of the b, e, and d, and a line underneath, you've got the headboard, footboard with the bedding in the middle. The child already has the pronunciation of the word bed and can therefore always identify which way a 'b' or a 'd' should point. In terms of lateralization, I would mention that we use the <u>left</u> side of the brain to process language, and this involves the <u>right</u> hand, the <u>right</u> visual field. If a child is using his left hand, there will be a tendency for him to mirror-image letters and possibly reverse letter positions. Do not change over the use of his hand, but make sure the child receives a considerable training to combat this tendency toward mirror-images.

Turning to memory training, research has shown that the memory span of dyslexic children is much less than that of normal children. Most of us can only remember about between seven and nine units of anything at any one time. If ever the telephone numbers get up to more than nine digits, we will all be in difficulty. However, there is a way out, one that, strangely, is called "chunking." We start grouping units into patterns so that we can now remember nine chunks, and there may be many units in each of those chunks. In other words, unfortunately, there can never be more than nine units in a particular chunk. This 'chunking' can be a help in teaching these children because we can group words together which are similar. In spelling, for example, we cluster in chunks because children can remember a large number of words which are spelled in a similar way.

Color coding vowel sounds also helps children because all they have to remember is one color for each sound and this will give them all the different blendings and graphemes which, although spelled in a similar way, stand for the same sound. Another device for aiding memory is to use Key Words with some kind of meaningful association to the children. The Key Word and its picture 'tags,' so to speak, a particular phoneme. So that the /F/ sound is always a fish, and so on. Then, everytime the children see an /F/ shape and they think of a fish, they see a picture of a fish in their minds. For spelling, I recommend the use of an indexed pocket notebook to which the child may refer all the time. He enters all his spelling 'demons' into the notebook which he keeps in his pocket for use at any time. I do not suggest for a moment that they should not also try and work out these words from memory; anyway, once the children have looked it up in their booklets twenty times, they can usually spell it anyway.

Next, we have to consider auditory sequencing memory. One method of helping here, is to give the children lists of instructions which get longer and longer. But you cannot have over seven sets of instructions or the children cannot cope. Dyslexic children tend to forget when you get about four sets of consecutive instructions. Make this activity a competition in the group. The children sit around the table and take it in turns. The teacher says to the first boy, "We will try you on two insturctions...." "Stand up and sit down." So he stands up and sits down. Then she says to the next one, "Stand up, go and touch the blackboard and then sit down." (That is three instructions.) He does so and then she goes to four sets of instructions and so on until one of the boys misses one of the instructions because he cannot remember it. If you do this two or three times a week, it exercises their memory and they will soon remember seven instructions in a series. This will help the children remember graphemes and phonemes in sequence. Marian Stuart, for example, tape-records stories and this I think is an excellent technique. Always use head sets as they put the sound within a quarter of an inch of the ear drum where it is difficult to ignore. Remember that auditory distractions are far, far more of a problem than visual distractions. If you present sets of words which sound alike but look quite different (this means that we are

hearing them, when we read them) children will confuse those words far more than they will those words which look alike but sound different. Almost all research is now indicating that auditory factors in all language processes including reading are far more important than the visual. Earphones on the children also cut out extraneous noise. If you can afford carpets, this will eliminate much auditory (noise) distraction. In Edmonton, they have a whole school carpeted and in Dade County, Florida, their reading clinics are fully carpeted. Motivation is extremely important if a positive self-concept is to be developed in the child. I use games quite often. Stott has invented a series of thirty games which are very good. His Kit trains children in phonics without them knowing it. We also use reinforcement tokens and rewards, plastic toys and these sorts of things, for the children that require them. Anything that will help get the child moving, get him attached, is used gradually, we can fade out the tokens as they become unnecessary. Similarly, we give lots of stars and stamps. The other day we had a boy who was so keen on animals but there was a great discussion as to whether we should use our animal stamps on his work, because he gets so excited about them we felt that the anticipation of getting stamps was just too much for him. He could not concentrate on the work he had to do to get the stamps. Equipment can sometimes be fascinating but only if the lesson content itself is fascinating. Too much programmed work seems very dull to children. I would like to see a much more colorful and interesting content in many of these published work programs for reading and writing. I did a research on teaching machines for the London County Council to find out whether they should introduce machines into their schools. I found out that the children who profited most from the teaching machines were the very clever children who did not need them anyway, except that they could progress each at his own individual rate. However, if you have lock-step systems of education, (which I deplore) individual instruction is useless. All children should be able to go right through all grades on individual instruction just as rapidly as they can. Far too many children are being held back all the time just to keep level with our lock-step grade level system of education. What is the use of taking a child quickly through a particular grade so that at the end of three months, they have finished the work in that grade only to mark time for the rest of the school year. One way of solving this is to organize the children into 'sets.' Pull out the children in those academic subjects in which they are bright and have them taught separately in classes as various levels of ability. The bright children can then rapidly progress right through the entire school curriculum. On organization, I'd also like to point out that one-to-one tuition is almost as economical as any other system. It achieves results much more quickly so that the child is usually remediated in half the time as compared to group teaching.

SUMMARY OF SPECIAL SESSIONS

A pre-conference dinner gave members of the Division of Counselor Education of the University of Wyoming, selected public school personnel from around the State and members of the Wyoming State Department of Education an opportunity to meet the two consultants, Dr. Alex Bannatyne and Dr. Don Dinkmeyer. The discussions set the tone for the Conference as well as afforded those present an opportunity to talk guidance with recognized leaders on an informal plain.

Dr. Dale Harper, representing the Rocky Mountain Special Education Instructional Material Center, gave a short presentation covering the work that his organization is doing in the exceptional children area. Dr. Harper discussed with the group materials that are available through the Material Center and outlined procedures to be followed to obtain material from the Center.

During the first day of the Conference the group was divided into two sections. Dr. Bannatyne conducted one of the sections elaborating upon his earlier presentation concerning diagnosis and classification. Dr. Dinkmeyer conducted the other section which was a group guidance demonstration involving six Cheyenne junior high school girls and their counselor, Miss Grace Sharp.

The first day of the Conference was highlighted by a buffet dinner for participants and spouses. The film strip, "As They Grow," was presented and a short discussion followed. Entertainment was provided by the choral group from East High School, Cheyenne.

The film, "Learning Disabilities", obtained through the Health and Welfare Division of the Metropolitan Life Insurance Company, was shown to the entire group. After viewing the film the participants were divided into groups of ten for the purpose of small group discussion of the message of the film as well as the value and benefits of the film.

Charles Wing and staff members from the Educational Planning and Diagnostic Center, School District No. One, Cheyenne, gave a slide presentation explaining the role of the Center and how it fits into the total educational picture of the school district. Specifically covered in the presentation were referral procedures, programming for individual needs, parent and school involvement in cases, follow-up and evaluation. The Center is funded under Title III, ESEA.

In addition to the major presentations by the two consultants, the entire group of participants observed a panel discussion made up of six mothers of 5th and 6th grade pupils from several elementary schools in the Cheyenne School System. This panel was moderated by Dr. Dinkmeyer using as a basis for discussion the pamphlet "ABC's of Guiding the Child" by Dreikurs and Goldman.

Another panel discussion was presented to the entire group focusing on school problems children face as seen by their parents. The same six mothers were involved in this presentation as well as professional educators representing several different disciplines within the pupil personnel framework. This panel was moderated by Dr. George Bailey, Superintendent of Schools, Cheyenne.

Luncheons were arranged each day so that small groups could meet with Dr. Dinkmeyer and Dr. Bannatyne for informal, across the table discussion.